CHIMNEY CERTIFICATION FOR REPLACEMENT OF FUEL FIRED EQUIPMENT

	WORKSITE ADDI	RESS:		
	Certifying Individual(Print Name)	(Company	
	Name:	Name:		_
	Address	01		
	Street:	City:		-
	State:	Zip:		
		Phone	#()	_
	Check The Appropriate Box	-	.,,,,	
	Type of replacement:		g vent/chimney:	
	[] Oil to Gas Conversion		B label vent	
	[] Gas Appliance Replacement	[]	L label vent	
	[] Oil to Oil Replacement		Masonry chimney-Tile lined Flexible liner	
	[] Other (describe):		Power vent/exhauster	
	[] Other (describe):		Other (describe):	
	to Gas Conversions:		tice and in substantially along of p	acidua
hereby	to Gas Conversions: certify that the chimney/vent is free an previous use serving an oil appliance. d for the appliance being installed.	I further certify the	hat the chimney/vent is appropriate	esidue ely lined
hereby	certify that the chimney/vent is free an previous use serving an oil appliance.	d clear of obstruct I further certify the Signature	ction and is substantially clean of rehat the chimney/vent is appropriate Date	esidue ely lined
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